

# 496 Independent Expenditure Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

RECEIVED  
CITY OF LAKE FOREST  
CITY CLERK'S OFFICE  
CALIFORNIA  
FORM 496

|   |  |   |  |
|---|--|---|--|
| NAME OF FILER<br>Restore California PAC         |  | Date of This Filing<br>10/27/2014   | 14 OCT 28 PM 4:01<br>For Official Use Only |
| AREA CODE/PHONE NUMBER<br>(949) 495-3314        | I.D. NUMBER (if applicable)<br>1352832 | Report No. 04   |  |
| STREET ADDRESS<br>30011 Ivy Glenn Drive Ste 223 |  | <input type="checkbox"/> Amendment to Report No. _____<br>(explain below) |  |
| CITY<br>Laguna Niguel                           | STATE<br>CA                            | ZIP CODE<br>92677   |  |
|   |  | No. of Pages<br>2   |  |

## 1. List Only One Candidate or Ballot Measure

|   |              |              |        |   |              |         |        |
|---|--------------|--------------|--------|---|--------------|---------|--------|
| NAME OF CANDIDATE SUPPORTED OR OPPOSED<br>Scott Voigts    |              |              |        | NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED |              |         |        |
| OFFICE SOUGHT OR HELD<br>City Council Member: Lake Forest | DISTRICT NO. | SUPPORT<br>X | OPPOSE | BALLOT NO./LETTER                           | JURISDICTION | SUPPORT | OPPOSE |

## 2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

| DATE       | DESCRIPTION OF EXPENDITURE                                 | AMOUNT   |
|------------|--|----------|
| 10/27/2014 | Printing and postage<br>Cumulative to date total \$5536.34 | 3,208.04 |
|            |  |          |
|            |  |          |
|            |  |          |
|            |  |          |

Reason for Amendment: \_\_\_\_\_

# 496 Independent Expenditure Report

496 INDEPENDENT EXPENDITURE REPORT

CALIFORNIA  
FORM **496**

NAME OF FILER

Restore California PAC

I.D. NUMBER (if applicable)

1352832

## 3. Contributions of \$100 or More Received\*

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE **   | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED | INTEREST RATES                                     |
|---------------|---|---|---|-----------------|--|
| 10/23/2014    | Meritage Homes<br>1250 Corona Pointe Court, Ste 210<br>Corona, CA 92879                         | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input checked="" type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC |   | 10,000.00       | If loan,<br>enter interest rate, if any<br>_____ % |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan,<br>enter interest rate, if any<br>_____ % |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan,<br>enter interest rate, if any<br>_____ % |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan,<br>enter interest rate, if any<br>_____ % |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan,<br>enter interest rate, if any<br>_____ % |
|               |   | <input type="checkbox"/> IND<br><input type="checkbox"/> COM<br><input type="checkbox"/> OTH<br><input type="checkbox"/> PTY<br><input type="checkbox"/> SCC            |   |                 | If loan,<br>enter interest rate, if any<br>_____ % |

\*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

### \*\*Contributor Codes

IND - Individual  
COM - Recipient Committee (other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

FPPC Form 496 (March/2011)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)